

Application Data Sheet

Inventor Information

Inventor One Given Name: Gary
Family Name: VAN NEST
Name Suffix:
Postal Address Line One 639 Skyline Dr.
Postal Address Line Two
City: Martinez
State or Province: CA
Postal or Zip Code: 94553
Citizenship Country: U.S.

Inventor Information

Inventor Two Given Name: Stephen
Family Name: TUCK
Name Suffix:
Postal Address Line One 1742 Woodhaven Way
Postal Address Line Two
City: Oakland
State or Province: CA
Postal or Zip Code: 94611
Citizenship Country: United Kingdom

Inventor Information

Inventor Three Given Name: Karen L.
Family Name: FEARON
Name Suffix:
Postal Address Line One 4064 Valente Court
Postal Address Line Two
City: Lafayette
State or Province: CA
Postal or Zip Code: 94549
Citizenship Country: U.S.

Inventor Information

Inventor Three Given Name: Dino
Family Name: DINA
Name Suffix:
Postal Address Line One 6140 Buena Vista Avenue
Postal Address Line Two
City: Oakland
State or Province: CA
Postal or Zip Code: 94618
Citizenship Country: U.S.

Correspondence Information

Name Line One: Karen R. Zachow
Name Line Two: Morrison & Foerster LLP
Address Line One: 755 Page Mill Road
Address Line Two:
City: Palo Alto
State or Province: California
Postal or Zip Code: 94304-1018
Telephone: (650) 813-5895
Fax: (650) 494-0792
Electronic Mail: KZachow@mofo.com

Application Information

Title Line One: BIODEGRADABLE IMMUNOMODULATORY
Title Line Two: FORMULATIONS AND METHODS FOR USE
Title Line Three: THEREOF
Total Drawing Sheets: None
Formal Drawings?:
Application Type: Utility
Docket Number: 377882001420

Representative Information

Representative Customer Number: 25226

Continuity Information

This application is a:
> Application One:
Filing Date:

Continuation-in-part of
09/802,359
March 9, 2001

which is a:
>>Application Two:
Filing Date:

Non-Provisional of
60/188,303
March 10, 2000

which is a:
>>>Application Three:
Filing Date:

Prior Foreign Applications

Foreign Application One:
Filing Date:
Country:
Priority Claimed:

00000000000000000000000000000000